

# EXHIBIT 21

AO 88B (Rev. 02/14) Subpoena to Produce Documents, Information, or Objects or to Permit Inspection of Premises in a Civil Action

## UNITED STATES DISTRICT COURT

for the  
Eastern District of MichiganRECEIVED  
DEC 6 2017

BY: CAT

Davontae Sanford

Plaintiff

v.

City of Detroit, et al.

Defendant

Civil Action No. 2:17-cv-13062

SUBPOENA TO PRODUCE DOCUMENTS, INFORMATION, OR OBJECTS  
OR TO PERMIT INSPECTION OF PREMISES IN A CIVIL ACTION

To: Southfield Police Department, 26000 Evergreen, P.O. Box 2055, Southfield, MI 48037

(Name of person to whom this subpoena is directed)

☒ **Production: YOU ARE COMMANDED** to produce at the time, date, and place set forth below the following documents, electronically stored information, or objects, and to permit inspection, copying, testing, or sampling of the material: All investigative reports involving James Tolbert; all communications between the Southfield Police Department and the Detroit Police Department referencing James Tolbert; all communications between the Michigan State Police and the Southfield Police Department referencing James Tolbert.

Place: Neufeld Scheck & Brustlin, LLP  
99 Hudson Street, 8th Floor  
New York, NY 10013

Date and Time:

11/29/2017 1:28 pm

DOB-  
DOI-

☐ **Inspection of Premises: YOU ARE COMMANDED** to permit entry onto the designated premises, land, or other property possessed or controlled by you at the time, date, and location set forth below, so that the requesting party may inspect, measure, survey, photograph, test, or sample the property or any designated object or operation on it.

Place:

Date and Time:

The following provisions of Fed. R. Civ. P. 45 are attached – Rule 45(c), relating to the place of compliance; Rule 45(d), relating to your protection as a person subject to a subpoena; and Rule 45(e) and (g), relating to your duty to respond to this subpoena and the potential consequences of not doing so.

Date: 11/29/2017

CLERK OF COURT

OR

Signature of Clerk or Deputy Clerk

Meghna Philip  
Attorney's signature

The name, address, e-mail address, and telephone number of the attorney representing (name of party) Plaintiff, Davontae Sanford, who issues or requests this subpoena, are:

Meghna Philip, Neufeld Scheck & Brustlin, LLP, 99 Hudson Street, New York, NY 10013, meghna@nsbcivilrights.com

## Notice to the person who issues or requests this subpoena

If this subpoena commands the production of documents, electronically stored information, or tangible things or the inspection of premises before trial, a notice and a copy of the subpoena must be served on each party in this case before it is served on the person to whom it is directed. Fed. R. Civ. P. 45(a)(4).

Sanford\_Southfield\_000001

<b>State of Michigan Uniform Law Citation</b>				Ticket No. <b>16SO05826</b>		<input type="checkbox"/> Victim Involved	
US DOT #				Incident No. <b>16-033801</b>		Dept. No. 0751	
The People of: <input type="checkbox"/> the State of Michigan <input type="checkbox"/> Township <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> County				Local Use/Arrest No.		Detection Device	
QF: <b>SOUTHFIELD</b>				BAC		1 of 1	
THE UNDERSIGNED SAYS THAT ON:		Month <b>08</b>	Day <b>20</b>	Year <b>16</b>	At approximately <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. <b>07:06</b>	Date of Birth	Month <b>04</b> Day <b>23</b> Year <b>69</b>
State <b>MI</b>	<input checked="" type="checkbox"/> Oper./Chauff <input type="checkbox"/> CDL	Driver License Number [REDACTED]				SSN (last 4 digits)	
Race <b>B</b>	Sex <b>M</b>	Height <b>5' 06"</b>	Weight <b>150</b>	Hair	Eyes <b>BRO</b>	Occupation/Employer	
Name (First, Middle, Last) <b>JAMES TOLBERT</b>							
Street [REDACTED]							
[REDACTED]						State	Zip Code <b>48033-3625</b>
Vehicle Plate No. [REDACTED]		Year	State	Vehicle Description (Year, Make, Color)		Veh. Type <b>P   A</b>	
THE PERSON NAMED ABOVE, in violation of <input checked="" type="checkbox"/> Local Ordinance <input type="checkbox"/> State Law <input type="checkbox"/> Administrative Rule							
UPON <b>TELEGRAPH RD</b>							
AT OR NEAR <b>W TWELVE MILE RD</b>							
WITHIN <input checked="" type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWNSHIP OF <b>SOUTHFIELD</b>							
COUNTY OF <b>OAKLAND</b> DID THE FOLLOWING							
MCL Cite/PACC Code/ Charge							
Type		Ordinance		Description (include any bond amount collected on each charge)		No.	
<input type="checkbox"/> C/I <input type="checkbox"/> Warn <input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Waiv	<input type="checkbox"/> Authorization pend.		DROVE UNREGISTERED VEHICLE		1		
09919							
<input checked="" type="checkbox"/> C/I <input type="checkbox"/> Warn <input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Waiv	<input type="checkbox"/> Authorization pend. Ord.		DISOBEY TRAFFIC SIGNAL/FLASHERS		2		
08400							
<input checked="" type="checkbox"/> C/I <input type="checkbox"/> Warn <input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Waiv	<input type="checkbox"/> Authorization pend.		NO PROOF OF INSURANCE		3		
09600							
TO THE COURT: Do not arraign on a felony charge until an authorized complaint is filed.							
Offense Code(s)							
1 2 3							
Key for Type: C/I = Civil Infraction Misd = Misdemeanor Fel = Felony Warn = Warning Fug = Fugitive Waiv = Violation for Which Fines/Costs May be Waived Authorization pend. = Authorization pending							
Remarks: <b>DISOBEYED TRAFFIC SIGNAL/ POSTED SIGN</b>							
<b>(NO TURN ON RED) TEL SOUTH OF W12MILE</b>							
<b>UNREG VEH (PURCHASED IN DEC 2016)</b>							
<b>NO INS (WG33)</b>							
CHECK IF APPROPRIATE <input type="checkbox"/> Damage to Property <input type="checkbox"/> Local Court Bond \$							
<input type="checkbox"/> Vehicle Impounded <input type="checkbox"/> Injury <input type="checkbox"/> License Posted in Lieu of Bond							
<input type="checkbox"/> Traffic Crash <input type="checkbox"/> Death <input type="checkbox"/> Appearance Certificate							
Person in Active Military Service <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> None							
SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS							
Appearance Date on or before <b>09/05/2016 @0830 AM</b>							
Hearing Date (if applicable) on <input type="checkbox"/> Contact Court							
<input type="checkbox"/> Juvenile Traffic Misd. (Court will Notify) <input type="checkbox"/> Formal Hearing Required. (Court will Notify)							
In the <b>46TH DISTRICT COURT</b> Court of <b>SOUTHFIELD</b>							
Court Address & Phone Number <b>46TH DISTRICT COURT</b>							
<b>26000 EVERGREEN ROAD</b>							
<b>(248) 796-5860 SOUTHFIELD, MI 48076</b>							
<input checked="" type="checkbox"/> I served a copy of the civil infraction complaint upon the defendant (or owner/occupant by posting if applicable). I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.							
Complainant's Signature and receipt if applicable				Month <b>08</b>	Day <b>20</b>	Year <b>16</b>	
<b>ROESKE</b>							
Officer's Name (printed)				Officer's ID No.			
<b>ROESKE</b>				<b>108</b>			
Agency ORI				Agency Name			
<b>MI- 6375100</b>				<b>SOUTHFIELD PD</b>			
UC-01a Payment:							
(rev. 6/05)							

Ticket  
**16SO05826**  
Name  
**TOLBERT, JAMES**  
Case No.



Offenses:		
<b>2300 - Larceny - Parts &amp; Accessories from Vehicle - LFA [SOMADGYV (11052)]</b>		
IBR Code / IBR Group <b>23G - Theft of Motor Vehicle Parts/Accessories / A</b>	Offense File Class <b>23006 - LARCENY -THEFT OF MOTOR VEHICLE PARTS/ACCESSORIES</b>	
Crime Against <b>PR</b>	Location Type <b>13 - Highway/Road/Alley/Sidewalk</b>	Offense Completed <b>Completed</b>
Domestic Violence <b>No</b>	Hate/Bias <b>00 - None (No Bias)</b>	
Using <b>A-Alcohol: No C-Computer Equipment: No D-Drugs/Narcotics: No</b>		Cargo Theft

People:									
<b>SUSPECT, UNKNOWN (S-SUSPECT) [SOMADGYV (11052)]</b>									
Last Name <b>SUSPECT</b>		First Name <b>UNKNOWN</b>		Middle Name		Suffix		Mr/Mrs/Ms	
DOB (Age)	Sex <b>U</b>	Race <b>UNKNOWN</b>	Ethnicity	Birth City & State	Birth Country	Country of Citizenship			
Street Address			Apt #	County	Country	Home Phone <b>UNKNOWN</b>		Work Phone	
City			State	Zip	Cell Phone <b>UNKNOWN</b>	Email			

<b>TOLBERT, JAMES (V-VICTIM) [SOMADGYV (11052)]</b>										
Victim Type <b>I - Individual</b>		Victim of <b>2304 - Larceny - Parts &amp; Accessories from Vehicle - LFA</b>								
PE:	W.Type:	Last Name <b>TOLBERT</b>		First Name <b>JAMES</b>		Middle Name		Suffix		Mr/Mrs/Ms
Aliases				Driver License# [REDACTED]		DL State <b>MI</b>	DL Country	Personal ID#		
DOB (Age) <b>04/23/1969 (46)</b>	Sex <b>M</b>	Race <b>BLACK</b>	Ethnicity	Birth City & State	Birth Country	Country of Citizenship				
Complexion	Build	Teeth	Height <b>5' 6"</b>	Weight <b>150</b>	Attire					
Street Address <b>[REDACTED]</b>			Apt #	County	Country	Home Phone <b>UNKNOWN</b>		Work Phone		
City <b>[REDACTED]</b>			State	Zip <b>[REDACTED]</b>	Cell Phone <b>[REDACTED]</b>	Email				
Victim Injury										
<b>Victim Offender Relationships</b>										
Offender				Type		Relationship				
<b>SUSPECT, UNKNOWN</b>				<b>S-SUSPECT</b>		<b>99-Relationship Unknown</b>				

<b>MADGY, VICTORIA (O-OTHER) (L-POLICE OFFICER) [SOMADGYV (11052)]</b>										
PE:	W.Type:	Last Name <b>MADGY</b>		First Name <b>VICTORIA</b>		Middle Name		Suffix		Mr/Mrs/Ms <b>OFFICER</b>
DOB (Age)	Sex	Race <b>UNKNOWN</b>	Ethnicity	Birth City & State	Birth Country	Country of Citizenship				
Street Address <b>26000 Evergreen</b>			Apt #	County <b>OAKLAND</b>	Country <b>USA</b>	Home Phone		Work Phone		
City <b>Southfield</b>			State <b>MI</b>	Zip <b>48037</b>	Cell Phone	Email				
<b>Phone/Email</b>										

CR No: 110015170

**Offenses:**

<b>13B - Simple Assault / A</b>			<b>13001 - NONAGGRAVATED ASSAULT</b>		
IBR Code / IBR Group		Offense File Class			
Crime Against		Location Type		Offense Completed	
<b>PE</b>		<b>20 - Residence/Home</b>		<b>Completed</b>	
Domestic Violence		Hate/Bias			
<b>Yes</b>		<b>00 - None (No Bias)</b>			
Using				Cargo Theft	
<b>A-Alcohol: No C-Computer Equipment: No D-Drugs/Narcotics: No</b>					
Entry					
<b>N - No Force Used</b>					
Weapons					
<b>40 - 40 - Personal Weapons (Hands, Feet, Teeth, et</b>					
Criminal Activity					
<b>N - None/Unknown</b>					

<b>5012 - Probation Violation (SO MILLER 04950)</b>		
IBR Code / IBR Group		Offense File Class
<b>90Z - All Other Offenses / B</b>		<b>50000 - OBSTRUCTING JUSTICE</b>
Crime Against		Location Type
		<b>11 - Government/Public Building</b>
Domestic Violence		Offense Completed
<b>No</b>		<b>Completed</b>
Hate/Bias		
<b>00 - None (No Bias)</b>		
Using		Cargo Theft
<b>A-Alcohol: No C-Computer Equipment: No D-Drugs/Narcotics: No</b>		

<b>5099 - Observed (Other) (SO HAYER 05355)</b>		
IBR Code / IBR Group		Offense File Class
<b>90Z - All Other Offenses / B</b>		<b>50000 - OBSTRUCTING JUSTICE</b>
Crime Against		Location Type
		<b>11 - Government/Public Building</b>
Domestic Violence		Offense Completed
<b>No</b>		<b>Completed</b>
Hate/Bias		
<b>00 - None (No Bias)</b>		
Using		Cargo Theft
<b>A-Alcohol: No C-Computer Equipment: No D-Drugs/Narcotics: No</b>		

**People:**

<b>TOLBERT, JAMES (A-ARRESTEE)</b>									
Last Name		First Name		Middle Name		Suffix		Mr/Mrs/Ms	
<b>TOLBERT</b>		<b>JAMES</b>							
Aliases			Driver License#		DL State	DL Country	Personal ID#		
			<b>T416367000313</b>		<b>MI</b>	<b>USA</b>			
DOB (Age)	Sex	Race	Ethnicity	Birth City & State	Birth Country	Country of Citizenship			
<b>04/23/1969 (41)</b>	<b>M</b>	<b>BLACK</b>	<b>Unknown</b>						
Eye Color		Hair Color		Hair Style		Hair Length		Facial Hair	
<b>Brown</b>									
Complexion		Build	Teeth	Height	Weight	Attire			
Held For	Finger Prints	Photos	Miranda Read	Miranda Waived	Number of Warrants		FBI#		
	<b>No</b>	<b>No</b>	<b>No</b>	<b>No</b>					
Street Address		Apt #	County	Country	Home Phone		Work Phone		
				<b>USA</b>					
City		State	Zip	Cell Phone	Email				



## ARREST SLIP FOR CONFINEMENT IN SOUTHFIELD JAIL

SUBJECT'S NAME TOLBERT JAMES MAIDEN: \_\_\_\_\_  
Last First Middle  
 ADDRESS: 26670 EMMETT SOUTHFIELD 48034  
Street City State Zip  
 HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
 D.O.B: 4-23-1969 RACE: B SEX: M BIRTH CITY & STATE: [REDACTED]  
 HGT: 5'6 WGT: 145 EYE: BRN HAIR: BLK GLASSES/CONTACTS: —  
 OPS CODE: \_\_\_\_\_ STATE: \_\_\_\_\_ SOCIAL SEC #: \_\_\_\_\_  
 SCARS/TATTOOS: —  
 EMERGENCY CONTACT: [REDACTED] RELATIONSHIP: [REDACTED]  
 ADDRESS: \_\_\_\_\_  
Street City State Zip  
 PHONE #: [REDACTED]

DATE: 7-15-2013 ARRESTING P.O.: \_\_\_\_\_ BADGE: \_\_\_\_\_  
Print Name  
 COMPL #: 110015170 CHARGES: 1) DV (Voe) F/M  
 2) \_\_\_\_\_ F/M 3) \_\_\_\_\_ F/M  
 4) \_\_\_\_\_ F/M 5) \_\_\_\_\_ F/M  
 IF SELD WARRANTS ENTER COMPL # & ORIGINAL CHARGE BELOW:  
 1) \_\_\_\_\_ F/M 2) \_\_\_\_\_ F/M  
 3) \_\_\_\_\_ F/M 4) \_\_\_\_\_ F/M  
 WARRANTS OTHER AGENCIES: \_\_\_\_\_

ARRESTING OFFICER'S SIGNATURE: [Signature]

NEEDS GOOD ID OR PRINT VERIFICATION: YES NO

OWN/INTOX RELEASE TIME: 46.00

REVIEWED BY: \_\_\_\_\_ BOND: \_\_\_\_\_

ORIGINAL — JAIL COPY      DUPLICATE — OFFICER COPY

**Sanford Southfield\_000032**

07/15/13 | 11:59:18 | MIDRS | TOLBERT,JAMES,,

Queried: TOLBERT, JAMES

Response: TOLBERT, JAMES

#### Statistics Summary

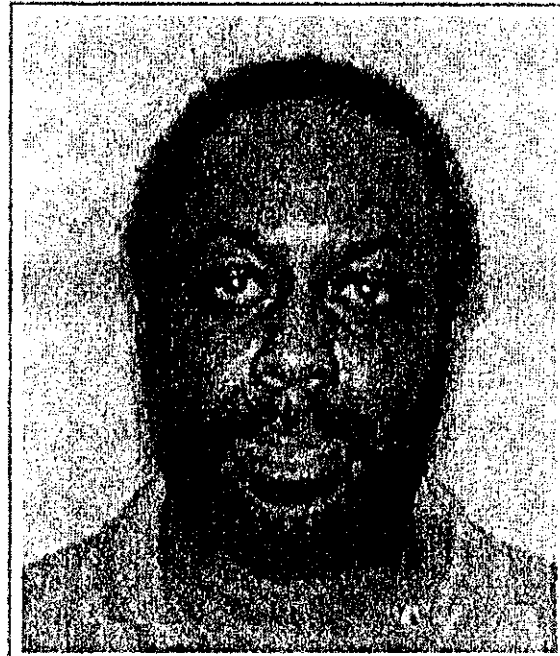
DOB: 04/23/1969	Race: N/A	Sex: M	Skin Tone: N/A
Height: 5-06	Weight: N/A	Eyes: BRO	Hair: N/A
OLN: [REDACTED]	Stat: [REDACTED]	Effective: [REDACTED]	Ex: [REDACTED]

#### Address Summary

26670 EMMETT ST SOUTHFIELD,, MI 48033-3625

\*\*\*NOTICE\*\*\* State and federal law restrict the use of driver's license images. Images can only be used for the identification of subjects in a criminal proceeding or for victim identification. Misuse of images may result in criminal and/or civil penalties. Contact your LEIN TAC for more information.

#### Associated Image(s)



[Copy Image](#) [Save Image](#) [Contact Info](#)



## SOUTHFIELD POLICE DEPARTMENT

ARCHIVED COMPUTER INFORMATION FOR 06-081475

ARRESTED

TOLBERT,JAMES,III

MNI: A000053994

JACKET#: 0025088

B/M 23-04-1969

HGT: 506-  
SKIN: DRKWGT: 160-  
ETH:EYES: BRO  
FBI#:

HAIR: BLK

BLD: MED  
ST NBR:

BIRTHPLACE:

BOOKING #: 06003827

ARREST DATE/TIME : 11/30/2006 3:02:00 AM

BOOKING DATE/TIME: 11/30/2006 4:24:00 AM

ARRESTED AT: 26670 EMMETT

HOW ARRESTED : T

REMARKS :

ARRESTED BY: 5258 -VANLACKEN,DANIEL,D

ASSISTED BY: 5329 -BIGGENS,SAMUEL Q III

CHARGES:

CHARGE: 1302- ASSAULT FAMILY W/OTHER WEAPON

DL/SS/SMT/OTHER Info:

OPS:

SOC SEC #:

NAMES USED:

TOLBERT,JAMES,III

ALL SYSTEM ACTIVITIES:

ACT	DESC
ARR	ASSAULT FELONIOUS

DATE	CFS	INC#
11/30/2006	13002	06-081475

ALL WARRANT ACTIVITY:

WARRANT	ISSUE DATE	CLEAR DATE	STAT	WARRANT#
---------	------------	------------	------	----------

## SOUTHFIELD POLICE DEPT.

26000 Evergreen, Southfield, MI 48076  
Phone: 248-798-5500 ORI # MI6375100INCIDENT / PROSECUTION  
REPORT

PO #

☐ PRIMARY ☐ SUPP PAGE 1 OF 5

01	DATE	DAY	SHIFT	PLAT	BADGE 1	BADGE 2	UCR	ADMIN	YEAR	INCIDENT #		
	11/3/06	TH	401	MY	16				06	81425		
02	RECEIVED	DISPATCHED	ARRIVED	COMPLETED	DATE(S) OCCURRED	TIME(S) OCCURRED	HOUR	DAY				
	013102	013018	013120	0000	11/3/06	0240		02	TH			
03	LOCATION / ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)					LOCATION 2 (INTERSECTING STREET)						
04	CITY	STATE	ZIP	CODE	BUSINESS NAME	BUSINESS PHONE						
05	ESTAB CODE	ORIGIN <input type="checkbox"/> PHONE <input type="checkbox"/> FOP	PERSON <input type="checkbox"/> PERSON <input type="checkbox"/> OTHER	HOW ACTIVATED <input type="checkbox"/> FOP <input type="checkbox"/> DISP	REPORT TAKEN <input type="checkbox"/> SCENE <input type="checkbox"/> STATION	REC BADGE	DISP BADGE	UNIT 1	UNIT 2			
	1000							17-5				
06	NATURE OF INCIDENT #1				ATT	CRIME CLASS	ALC DRUGS COMP	BIAS	WEAPON	# PREM	ACTIVITY	POINT OF ENTRY / ATTACK
	Domestic Assault					1300						
07	NATURE OF INCIDENT #2				ATT	SEC CLASS	ALC DRUGS COMP	BIAS	WEAPON	# PREM	ACTIVITY	METHOD OF ENTRY / ATTACK
08	NATURE OF INCIDENT #3				ATT	SEC CLASS	ALC DRUGS COMP	BIAS	WEAPON	# PREM	ACTIVITY	TOOL / OBJECT / WEAPON
09	NATURE OF INCIDENT #4				ATT	SEC CLASS	ALC DRUGS COMP	BIAS	WEAPON	# PREM	ACTIVITY	OTHER CHARACTERISTICS

CODES (1)REPORT BY (2)OWNER (3)VICT (4)PERS INTERV (5)ARREST (6)SUSP (7)MISS'G (8)WITN (9)SECURD BY (O)JUV ARREST (D)DRIVER (P)PASSNGR (R)RESPONSIBLE (S)SUMMONED (X)MISC

10	CODE	VICT #	ACTUAL VICTIM (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE	VICTIM TO RECEIVE CVRA NOTICE
	1314	01	Norman Athelric Sacka	BE	M	10/24/67	39	
11	CODE	NAME (LAST, FIRST, MIDDLE, SUFFIX) (ACTUAL VICTIM'S REP)	RAC	SEX	DOB	AGE	RELATION TO ACTUAL VICTIM	

12	ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)					CITY	STATE	ZIP
13	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	CONN	TYP	REL TO OFN #	INJ V CIRC LHC
					2	3	0101	M

14	PE	CODE	OFN #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE
		1456	01	Talbot James	BE	M	10/21/69	37
15	ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)					CITY	STATE	ZIP

16	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR	LENGTH	STYLE	BUILD	SKIN TONE
			5106	160	BRO	BLK	5'10"	STRAIGHT	MED	BRN
17	STATE	DRIVER'S LICENSE #	SOC SEC #	SID #	FBI #	MISC #				

18	ALIAS (MAIDEN NAME, LAST, FIRST, MIDDLE, SUFFIX)					COMMENTS / CLOTHING / ETC					VIOLATION	
19	ARREST CHR 1	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM DIS	ARREST CHR 2	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM DIS
	1302	11/3/06	MY	16								

20	OST	MCH	CLR	ARMED AT ARREST	ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MDT	DISP <input type="checkbox"/> PER <input type="checkbox"/> TEL	STATUS 1 <input type="checkbox"/> JAILED 2 <input type="checkbox"/> RELEASED 3 <input type="checkbox"/> APPEARANCE TCKT 4 <input type="checkbox"/> NOT ARRESTED	FINGERPRINTS <input type="checkbox"/> YES <input type="checkbox"/> NO	CHR <input type="checkbox"/> YES <input type="checkbox"/> NO	ACTION REQUESTED 1 <input type="checkbox"/> ARREST WARRANT 2 <input type="checkbox"/> SEARCH WARRANT 3 <input type="checkbox"/> PADLOCK 4 <input type="checkbox"/> INJUNCTION 5 <input type="checkbox"/> FORFEITURE 6 <input type="checkbox"/> OTHER		

CODES (H)HOLD (S)STOLEN (Y)COUNTERFEIT (E)EVIDENCE (L)LOST (A)ATTACHED (R)RECOVERED (F)FOUND (C)CONFISCATED (X)IMPOUNDED (V)SUSPECT VEHICLE (B)BURNED

21	CODES	DESCRIPTION	PROP TYPE	QUANTITY	YEAR	MAKE	MODEL
	L	.40 cal	131	1		Glock	22
22	STYLE	COLOR(S)	MONTH	YEAR	STATE	LICENSE	SERIAL / VIN #
	B/LK						013450PD

23	STOLEN	DAMAGED	RECOVERED	PROPERTY TAG #	LOCATION PROPERTY	LEIN REF #	NIC #				
24	COMMENTS / INSURANCE COMPANY / LIEN HOLDER / BANK				REC BADGE 1	REC BADGE 2	LEO	RECOVERY DATE	DG TYPE	DRUG AMOUNT	MEAS
	21 Magazine and 14 rounds										

25	BRIEF SUMMARY OF OFFENSE (TITLE / SUMMARY)											YEAR INCIDENT #
26												
27												
28												

Form 102 10-98	INVESTIGATING OFFICER(S)	REVIEWED BY	ATTENTION TO	I affirm the above information is true and correct. O.I.C. Signature
	W. V. Vacker	488		

Sanford Southfield 000045

\*\*\*\*\*

SOUTHFIELD POLICE DEPARTMENT  
SFPD INTERNAL HISTORY

A-000053994

11/30/06 04:26

Page 1

\*\*\*\*\*

TOLBERT, JAMES, III

BLACK/MALE/37-04/23/69 5'06" 160LBS  
BROWN EYES, BLACK HAIR  
DARK SKIN, MEDIUM BUILD

MNI-ID#: A-000053994

SBI#:

SS#

Jacket#: 0025088

FBI#:

DL#:

ARRESTS

Arrested	Booking#	Call#	Upt.Charge	Description	S
11/30/06	06-003827	06-081475	1302	ASSAULT FAMILY OTH	O

# 277668

*The circumstances of the arrest and the condition of the prisoner have been reviewed by:*

*[Signature]*

Bond Amount

*No Bond*

Condition of Prisoner:

Fingerprints

Photo

Who notified of detention

Telephone #

Date/Time

Inmate #:

TCN/CTN#:

PACC Code:

Ordinance:

Date of Offense:

Date of Release

Time

Reason

Arraignment Date

Charge

Judge

Plea

Disposition

B

O

N

D

S

SOUTHFIELD POLICE DEPT.  
26000 Evergreen, Southfield, MI 48076  
Phone: 248-354-4720 ORI # MI6375100

### ADDITIONAL SUSPECTS

PO # \_\_\_\_\_ ☐ PRIMARY ☒ SUPP PAGE 1 OF 1

01	DATE	DAY	SHIFT	PLAT	BADGE 1	BADGE 2	UCR	ADMIN	YEAR	INCIDENT #						
	12/15/05	05	ST	02	4581				05	76695						
CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSP (7) MISS'G (8) WITHN (9) SECUR'D BY (O) JUV ARREST (D) DRIVER (P) PASSNGR (R) RESPONSIBLE (S) SUMMONED (X) MISC																
02	PE	CODE	OFN #	NAME (LAST, FIRST, MIDDLE, SUFFIX)				RAC	SEX	DOB	AGE					
		61	01	TOLBERT, JAMES III				B	M	01/23/69	36					
03	ADDRESS				(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY			STATE	ZIP			
04	HOME PHONE				BUSINESS PHONE				HEIGHT	WEIGHT	EYES	HAIR	LENGTH	STYLE	BUILD	SKIN TONE
									510	165	BRO	BLK		NAT	MED	MED
05	STATE	DRIVER'S LICENSE #			SOC SEC #			SID #	FBI #	MISC #						
06	ALIAS (MAIDEN NAME)				COMMENTS / CLOTHING / ETC						VIOLATION					
07	ARREST CHR 1	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS	ARREST CHR 3	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS		
08	ARREST CHR 2	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS	ARREST CHR 4	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS		
09	OST	MON	CLR	ARMED AT ARREST	ORIGIN	<input type="checkbox"/> DISP <input type="checkbox"/> FOP <input type="checkbox"/> MDT	<input type="checkbox"/> PER <input type="checkbox"/> TEL	STATUS		FINGERPRINTS		CHR	ACTION REQUESTED			
								1 <input type="checkbox"/> JAILED 3 <input type="checkbox"/> APPEARANCE TCKT 2 <input type="checkbox"/> RELEASED 4 <input type="checkbox"/> NOT ARRESTED		1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	1 <input type="checkbox"/> ARREST WARRANT 3 <input type="checkbox"/> PADLOCK 5 <input type="checkbox"/> FORFEITURE 2 <input type="checkbox"/> SEARCH WARRANT 4 <input type="checkbox"/> INJUNCTION 6 <input type="checkbox"/> OTHER			
10	COMMENTS / CLOTHING															

02	PE	CODE	OFN #	NAME (LAST, FIRST, MIDDLE, SUFFIX)				RAC	SEX	DOB	AGE					
03	ADDRESS				(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY			STATE	ZIP			
04	HOME PHONE				BUSINESS PHONE				HEIGHT	WEIGHT	EYES	HAIR	LENGTH	STYLE	BUILD	SKIN TONE
05	STATE	DRIVER'S LICENSE #			SOC SEC #			SID #	FBI #	MISC #						
06	ALIAS (MAIDEN NAME)				COMMENTS / CLOTHING / ETC						VIOLATION					
07	ARREST CHR 1	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS	ARREST CHR 3	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS		
08	ARREST CHR 2	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS	ARREST CHR 4	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS		
09	OST	MON	CLR	ARMED AT ARREST	ORIGIN	<input type="checkbox"/> DISP <input type="checkbox"/> FOP <input type="checkbox"/> MDT	<input type="checkbox"/> PER <input type="checkbox"/> TEL	STATUS		FINGERPRINTS		CHR	ACTION REQUESTED			
								1 <input type="checkbox"/> JAILED 3 <input type="checkbox"/> APPEARANCE TCKT 2 <input type="checkbox"/> RELEASED 4 <input type="checkbox"/> NOT ARRESTED		1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	1 <input type="checkbox"/> ARREST WARRANT 3 <input type="checkbox"/> PADLOCK 5 <input type="checkbox"/> FORFEITURE 2 <input type="checkbox"/> SEARCH WARRANT 4 <input type="checkbox"/> INJUNCTION 6 <input type="checkbox"/> OTHER			
10	COMMENTS / CLOTHING															

02	PE	CODE	OFN #	NAME (LAST, FIRST, MIDDLE, SUFFIX)				RAC	SEX	DOB	AGE					
03	ADDRESS				(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY			STATE	ZIP			
04	HOME PHONE				BUSINESS PHONE				HEIGHT	WEIGHT	EYES	HAIR	LENGTH	STYLE	BUILD	SKIN TONE
05	STATE	DRIVER'S LICENSE #			SOC SEC #			SID #	FBI #	MISC #						
06	ALIAS (MAIDEN NAME)				COMMENTS / CLOTHING / ETC						VIOLATION					
07	ARREST CHR 1	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS	ARREST CHR 3	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS		
08	ARREST CHR 2	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS	ARREST CHR 4	ARREST DATE	PLAT	BADGE 1	BADGE 2	FM	DIS		
09	OST	MON	CLR	ARMED AT ARREST	ORIGIN	<input type="checkbox"/> DISP <input type="checkbox"/> FOP <input type="checkbox"/> MDT	<input type="checkbox"/> PER <input type="checkbox"/> TEL	STATUS		FINGERPRINTS		CHR	ACTION REQUESTED			
								1 <input type="checkbox"/> JAILED 3 <input type="checkbox"/> APPEARANCE TCKT 2 <input type="checkbox"/> RELEASED 4 <input type="checkbox"/> NOT ARRESTED		1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	1 <input type="checkbox"/> ARREST WARRANT 3 <input type="checkbox"/> PADLOCK 5 <input type="checkbox"/> FORFEITURE 2 <input type="checkbox"/> SEARCH WARRANT 4 <input type="checkbox"/> INJUNCTION 6 <input type="checkbox"/> OTHER			
10	COMMENTS / CLOTHING															

Form 104 10-99 INVESTIGATING OFFICER(S) Wojcikowski #81 REVIEWED BY \_\_\_\_\_ ATTENTION TO \_\_\_\_\_ I affirm the above information is true and correct. O.I.C. Signature \_\_\_\_\_

SOUTHFIELD POLICE DEPARTMENT  
ARCHIVED COMPUTER INFORMATION FOR 00-046954

ARRESTED

TOLBERT,JAMES III

MNI: A000013880

[REDACTED] RN ,DESK  
( ) -

JACKET#: 0005919

B/M 23-04-1969 HGT: 506- WGT: 165- EYES: BRO HAIR: BLK BLD: MED  
SKIN: DBR ETH: FBI#: ST NBR:

BIRTHPLACE:

BOOKING #: 00002482

ARREST DATE/TIME : 9/20/2000 3:52:00 AM

BOOKING DATE/TIME: 9/20/2000 3:52:00 AM

ARRESTED AT: 25690 SHIAWASSEE,130

HOW ARRESTED : O

REMARKS :

ARRESTED BY: 5331 -RIVERA,ROLANDO  
ASSISTED BY: 5213 -KENNEDY,AUTUMN,L

CHARGES:

CHARGE: 1303- ASSAULT FAMILY -STRONG ARM  
CHARGE: 5297- CCW POSSESS OR USE FIREARM UND

COMMENTS:

James Tolbert Incident 00/46954 Pros. Order #00-46806  
10/06/00 Case Closed. Warrant denied by Prosecutor.  
Insufficient Evidence.

OTHER ADDRESSES USED:

DL/SS/SMT/OTHER Info:

OPS: [REDACTED]  
SOC SEC #: [REDACTED]

NAMES USED:

TOLBERT,JAMES III

ALL SYSTEM ACTIVITIES:

ACT	DESC	DATE	CFS	INC#
VIC	ASSAULT FELONIOUS	12/04/2005	13002	05-076695
SUS	ASSAULT FELONIOUS	12/04/2005	13002	05-076695
ARR	ASSAULT FELONIOUS-DOMESTI	09/20/2000	13002D	00-046954

ALL WARRANT ACTIVITY:

WARRANT	ISSUE DATE	CLEAR DATE	STAT	WARRANT#
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